_														
PATENT APPLICATION FEE DETERMINATION RECO								Application or Docket Number					nber	
سنيه	PAICNIA	טאנ		٠	091	90	1817	2						
	CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALI TYPE	EN	TITY	OR		R THAN ENTITY	
TO	OTAL CLAIMS	,					1	RAT	E	FEE	7	RATE	FEE	
FC	DR .		NUMBER	FILED	NUME	BER ÉXTRA		BASIC	FEE	\$375	OR	BASIC FEE	\$750	
TC	OTAL CHARGEA	ABLE CLAIMS	mir	nus 20=	*		X\$ 9				OR	X\$18=		
INC	DEPENDENT CL	AIMS	mi	inus 3 =	*	X42			_		1	X84=		
ML	JLTIPLE DEPEN	NDENT CLAIM P	RESENT		<u> </u>				\dashv		OR			
* If	the difference	in column 1 is	less than 76	ero enter		column 2	+140=				OR	+280=		
••			•	,		Widnin 2		TOTA	L L	····	OR	TOTAL		
		LAIMS AS A (Column 1)	WENDED	PAH - C (Colun		(Column 3)		SMALL ENTITY			OR	OTHER SMALL I		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	IEST BER OUSLY	PRESENT EXTRA		RATE	T	ADDI- FEE		RATE	ADDI- TIONAL FEE	
TO W	Total	*	Minus	**		=		X\$ 9=	=	•	OR	X\$18=		
ME	Independent	*	Miņus	***		=		X42=	1		OR	X84=		
9	FIRST PRESE	NTATION OF MU	JLTIPLE DEP	LE DEPENDENT CLAIM				+140=	-		1 1	+280=		
			L	TOT	AL		OR OR	TOTAL						
		(Column 1)	(Column 2) (Column 3)				Д	ADDIT. FI	EE L] · · · ,	ADDIT. FEE		
ENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	IEST BER OUSLY	PRESENT EXTRA		RATE		ADDI- IONAL FEE		RATE	ADDI- TIOŅAL FEE	
NON NON	Total	· 15	Minus	** 8	20	=	X\$ 9=	.		OR	X\$18=	-		
AMENDM	Independent	*	Minus	***	3	= -		X42=	1	7	OR	X84=		
	FIRST PRESE	NTATION OF MU	JLŢIPLE DEP	ENDENT	CLAIM		┚	+140=	1		OR	+260=		
							101	TOT	AL -			TOTAL	\rightarrow	
		(Column 1)	(Column 2)			(Column 3)	ADDIT. F (Column 3)		E L		JOI 1	ADDIT. FEE		
ပ	1 2 2 4	CLAIMS		HIGHE	EST				7	ADDI-	ſ		ADDI-	
AMENDMENT (REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	DUSLY	PRESENT EXTRA	$ \downarrow $	RATE	T	IONAL FEE		RATE	TIONAL FEE	
	Total		Minus	**		=		X\$ 9=			OR	X\$18=		
AME	Independent	* NTATION OF MU	Minus	***	CLAIM	[=		X42=	T		OR	X84=		
	FINSI FRESEI	NIATION OF IVIO	JUHPLE DEF	ENDEM	CLATIV		'	+140=			OR	+280=		

If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

TOTAL ADDIT. FEE OR ADDIT.

THe "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

PATENT APPLICATION FEE DETERMINATION RECORD Effective January 1, 2003

Application or Docket Number

	CLAIMS	AS FILE	SMALL TYPE	ENTITY	OF		R THAN		
TOTAL CL	AIMS		•		RATE	FEE	7	RATE	FEE
FOR		NUME	ER FILED	NUMBER EXTRA	BASIC F	EE \$375	OF		
TOTAL CHAI	RGEABLE CLAIMS	3	minus 20=	*	X\$ 9=		OF	X\$18=	
INDEPENDE	VT CLAIMS		minus 3 =	*	X42=		7	\ \var	
MULTIPLE DI	EPENDENT CLAIM	PRESENT					-IOR	 	
* If the differ	ence in column 1	is less than	zero, enter	"0" in column 2	+140=		OR		
0	CLAIMS AS			•	TOTAL	· L	OR		
	(Column 1		Colum)		SMALL	ENTITY	OR	SMALL	THAN ENTITY
Total Independe	CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ST ER PRESENT JSLY EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TI QNA FEE
Total	. 15	Minus	** 2	O =	X\$ 9=		OR	X\$18=	1
Independe		Minus	*** J	=	X42=		OR	X84=	
Trinsi Phi	ESENTATION OF N	MULTIPLE D	EPENDENT	CLAIM	+140=		OR	+280=	1
					TOTAL		_ L	TOTAL DDIT FEE	+
	(Column 1)		(Column	(Column 3)	ADDIT. FEE		[- · · β	IDDII. FEEL	·
, Alexander Control	CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOU PAID FO	R PRESENT SLY EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIO NAL FEE
Total	*	Minus	##	=	X\$ 9=		OR	X\$18=	
Independen		Minus	***	=	X42=		OR	X84=	
FIRST PRE	SENTATION OF M	ULȚIPLE DE	PENDENT C	LAIM	+140=		<u> </u>	+280=	
					TOTAL		Ľ	TOTAL	
	(O-1)		(O - t	0) (Ontrode 0)	ADDIT. FEE		OR AI	DDIT. FEE	
	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column HIGHEST NUMBER PREVIOUS PAID FOR	PRESENT LY EXTRA	RATE	ADDI- TIONAL	Γ	RATE	ADDI- TIONAL
Total		Minus	**	=	X\$ 9=	FEE	-	X\$18=	FEE
Independent	*	Minus	***	=		l°	~``}-		
FIRST PRES	ENTATION OF MU	LTIPLE DEI	PENDENT CL	AIM 🔲	X42=		PR -	X84=	
the enter to					+140=	0	R +	·280=	
the "Highest N	umn 1 is less than the umber Previously Pai	d For" IN THIS	TOTAL ADDIT. FEE	0	R ADI	TOTAL DIT. F.E.E			
he "Highest Nu	umber Previously Pal mber Previously Paid	For" (Total or	Independent) is	s than 3, enter "3." s the highest number fo	und in the appro	opriate box in	columr	11.	

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

H057-235

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THA	
TOTAL CLAIMS			1				ſ	RATE	FEE), -	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		ŀ	BASIC FEE	355.00	OR	BASIC FEE	· 710.00
TOTAL CHARGEABLE CLAIMS			/5 min	/ minus 20= *		· \$		X\$ 9=		OR	X\$18=	
IND	EPENDENT CL	AIMS	minus 3 =		* Ø		I	X40=		OR	X80=	
MU	LTIPLE DEPEN	DENT CLAIM PF	RESENT				Ī	+135=	•	OR	+270=	*****
* If	the difference	in column 1 is	less than zero, enter "0" in column 2					TOTAL		OR	TOTAL	7/0
	∫ CI		MENDED - PART II					SMALL ENTITY			OTHER SMALL	
		(Column 1) CLAIMS	Market (NOTE OF THE	(Column 2) HIGHEST		(Column 3)	_	SWALL		OR I I	OMALL I	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVI	BER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total	./3	Minus	2	ρ	=		X\$ 9=		OR	X\$18=	
AME	Independent	NITATION OF MI	Minus	***	T CLAIM	=		X40=		OR	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+135=	 - 	OR	+270=	
			TOTAL		OR	TOTAL ADDIT. FEE						
		(Column 1)		,	ADDIT. FEE		•	ADDIT. 1 CC				
		CLAIMS		HIG	mn 2) (Column 3)				ADDI-) [ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVI	MBER OUSLY FOR	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
NDM	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	ENDENT CLAI		=		X40=		OR	X80=	
	·			+135=		OR	+270=					
								TOTAL		OR	TOTAL ADDIT. FEE	
		(O-1,		(Calu	O\	(Calumn 2)	P	ADDIT. FEE	······································		AUDII. FEEI	
		(Column 1) CLAIMS			mn 2) HEST	(Column 3)	l -		1001	l		4001
AMENDMENT C		REMAINING AFTER AMENDMENT		NUN PREVI	MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDM	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	į
AME	Independent	*	Minus *** JLTIPLE DEPENDENT		T CL AIM	=		X40=		OR	X80=	ř
_	FINOI PRESE	INTATION OF M	OLITE DE	FINDEIN	CEAIN		!	+135=		OR	+270=	
		mn 1 is less than t					Ļ	TOTAL		OR	TOTAL	
***	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											